MAN 2 5 700 E Agorney Docket No. IMMR-028/00US

## **PATENT**

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re appln. of Richard L. CUNNINGHAM et al.

RECEIVED

Serial No.:

09/848,966

Examiner:

Nitin Patel

MAY 2 8 2004

Filed:

May 4, 2001

Art Unit:

2673

Technology Center 2600

Confirmation No.: 6935

For: HAPTIC INTERFACE FOR PALPATION SIMULATION

U.S. Patent and Trademark Office 2011 South Clark Place Customer Window Crystal Plaza Two, Lobby, Room 1B03 Arlington, VA 22202

## TRANSMITTAL OF DOCUMENTS.

Enclosed are the following documents for the above-identified application:

[x]	Reply and Amendment Under 37 C.F.R. 1.111
[]	Petition for Extension of Time
[]	Request for Approval of Drawing Changes
[x]	Information Disclosure Statement Transmittal, Information Disclosure Statement,
	PTO/SB/08 and copies of 43 references provided on enclosed CD
[]	Notice of Appeal
	Associate Power
ij	Revocation and New Power

- [] Change of Address[x] Return receipt postcard
- [x] Return receipt postcard
- [x] Check in the amount of \$180.00 for the total fee as calculated below
- [] Other:

## The fee has been calculated as follows:

	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY FILED	EXTRA CLAIMS	RATE	FEE		
Total Claims	51	- 54 =		x \$18.00	\$0.00		
Independent Claims	4	-4 =		x \$86.00	\$0.00		
If multiple dependent claims are presented, add \$290.00							
Total Amendm	\$0.00						
If small entity status is applicable, subtract 50% of Total Amendment Fee							
Other fees: (spe	180.00						
TOTAL FEE	\$180.00						

[x] A check for the total fee is attached.

Please charge \$ to Deposit Account No. 50-1283 for the total fee. This paper is being submitted in duplicate.

The Commissioner is hereby authorized to charge any appropriate fees under 37 C.F.R.

§§1.16, 1.17, and 1.21 that may be required by this paper, and to credit any overpayment, to Deposit Account No. 50-1283.

Dated: May 25, 2004

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